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2012 MAY -9 AM ID: 52

J. SAULSBERRY EXAMINER

MAY 9 2012

COVER LETTER

TO: Registration Section Division of Corporations		
_{SUBJECT} ; Joppy's		
Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida Existence, and check are submitted to register the above referenced foreign limited liability company to transact bus		
Please return all correspondence concerning this matter to the following:		
Robbert and Anita de Granje		
Name of Person		
Joppy's L.L.C.		
Firm/Company		
14830 Pinnacle place	2012 M	
Address	MAY -	77
Naples, Florida 34119 명한	9	FILED
City/State and Zip Code	A	اسط 1 1 1
floridanaples@hotmail.com	10:52	~
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Rob de Granje 31 (239) 5377367		
Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: \$\int\\$\$125.00 \text{Filing Fee} \text{\$\subseteq}\$\$\$\$130.00 \text{Filing Fee & Certificate of Status}\$\$\$\$Certificate of Status \text{\$\subseteq}\$\$\$\$\$\$Certified Copy	ate	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Joppy's LLC	s "Limited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:	ress of the principal office of the Limited L	iability C	Compan	y is:
Principal Office Address:	Mailing Address:			
14830 Pinnacle place Naples Florida 34119	14830 Pinnacle place Naples Florida 34119			
	t, Registered Office, & Registered Agent' as its own Registered Agent. You must designate an indivition.)			
The name and the Florida street add	dress of the registered agent are:	≱	28	
Robbert de (Granje	CAE	2012 MAY -9	
	Name	ASS	7	
14830 Pir	nnacle place	E O		
	orida street address (P.O. Box NOT acceptable)	F.S.	*	Γr
Naples	_{FL} 34119	물로	Ş	
	City, State, and Zip)≽ (Ð,Ú)	52	
liability company at the place de registered agent and agree to act in statutes relating to the proper and accept the obligations of my pos	agent and to accept service of process for the esignated in this certificate, I hereby accept to this capacity. I further agree to comply with a complete performance of my duties, and I a sition as registered agent as provided for in (he appoir h the prov m familia	itment o visions or with o	is of all ind

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Robbert de Granje	
MOTO	14830 Pinnacle place	_
	Naples Fl. 34119	_
MGRM	Anita de Granje	
	14830 Pinnacle place	
	Naples Fl. 34119	_ =
	SAH SAH SAH SAH	- 1 AU 2187
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		- 5 - 7
(Use attachment if necess	ary)	
CLE V: Effective date, if or effective date is listed, the conductive date is listed, the conductive date of filings.	her than the date of filing: (OPTIO	ONA s day
o days after the date of fin	RE:	

(In accordance with section 648.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Robbert A. N de Granje

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)